

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

MARK MOORES FOR CONGRESS

ADDRESS (number and street)

PO BOX 90970



Check if different than previously reported. (ACC)

ALBUQUERQUE

NM

87199

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00773879

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

NM

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y
07 / 01 / 2021

through

M M / D D / Y Y Y Y
09 / 13 / 2021

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

CRAVENS, MELANIE, , ,

Type or Print Name of Treasurer

Signature of Treasurer

CRAVENS, MELANIE, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y
09 / 14 / 2021

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 2 / 13

Write or Type Committee Name

MARK MOORES FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	2	1

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	2	1

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	105.50	580930.79
(b) Total Contribution Refunds (from Line 20(d))	- 100.00	2870.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	205.50	578060.79
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	603.89	732220.91
(b) Total Offsets to Operating Expenditures (from Line 14).....	477.67	602.17
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	126.22	731618.74
8. Cash on Hand at Close of Reporting Period (from Line 27).....	0.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 05/2016)

PAGE 3 / 13

Write or Type Committee Name

MARK MOORES FOR CONGRESS

Report Covering the Period:

From:

M M / D D / Y Y Y Y
07 01 2021

To:

M M / D D / Y Y Y Y
09 13 2021

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:**(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

- 992.00

356776.44

(ii) Unitemized.....

97.50

154552.41

(iii) TOTAL of contributions from individuals ▶

- 894.50

511328.85

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

1000.00

69601.94

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

105.50

580930.79

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

200000.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

200000.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.)

477.67

602.17

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

583.17

781532.96

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 13

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	603.89	732220.91
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	15542.05	15542.05
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	15542.05	15542.05
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	- 100.00	620.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	2250.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	- 100.00	2870.00
21. OTHER DISBURSEMENTS	0.00	30900.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	16045.94	781532.96

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	15462.77
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	583.17
25. SUBTOTAL (add Line 23 and Line 24).....	16045.94
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	16045.94
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0.00

SCHEDULE A (FEC Form 3)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 13

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MARK MOORES FOR CONGRESS

Full Name (Last, First, Middle Initial)

BYRD, AMY, , ,

A.

Mailing Address 142 FOREST PKWY.

City

VALLEY PARK

State

MO

Zip Code

63088

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2021

☐ Primary ☐ General

☒ Other (specify) ▼
Special-General

Election Cycle-to-Date ▼

10.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 28 2021

Transaction ID : SA11AI.14801

Amount of Each Receipt this Period

2.50

☒ Memo Item

EARMARKED THROUGH SFA PAC [SA11A1.14787]
DEBT RETIREMENT

Full Name (Last, First, Middle Initial)

FOSS, LAURI, , ,

B.

Mailing Address 1205 MARIGOLD DRIVE NORTHEAST

City

ALBUQUERQUE

State

NM

Zip Code

87122

FEC ID number of contributing
federal political committee.

C

Name of Employer

CWD

Occupation

DENTAL ASSISTANT

Receipt For: 2021

☐ Primary ☐ General

☒ Other (specify) ▼
Special-General

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 01 2021

Transaction ID : SA11AI.14803

Amount of Each Receipt this Period

- 1000.00

☐ Memo Item

EARMARKED THROUGH WINRED [SA11A1.14792]
CHARGEBACK

Full Name (Last, First, Middle Initial)

STAND FOR AMERICA PAC

C.

Mailing Address C/O RED CURVE SOLUTIONS
138 CONANT STREET, 2ND FLOOR

City

BEVERLY

State

MA

Zip Code

01915

FEC ID number of contributing
federal political committee.

C

C00765982

Name of Employer

Occupation

Receipt For: 2021

☐ Primary ☐ General

☒ Other (specify) ▼
Special-General

Election Cycle-to-Date ▼

41688.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 07 2021

Transaction ID : SA11AI.14787

Amount of Each Receipt this Period

8.00

☐ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

- 992.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 13

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

MARK MOORES FOR CONGRESS

Full Name (Last, First, Middle Initial)

A.**STOKES, JOSEPH, , ,**

Mailing Address 23683 NORTH HIGH DUNES DRIVE

City
FLORENCEState
AZZip Code
85132FEC ID number of contributing
federal political committee.

C

Name of Employer
DHSOccupation
OFFICER

Receipt For: 2021

☐ Primary ☐ General
☒ Other (specify) ▼

Special-General

Election Cycle-to-Date ▼

9.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		30		2021

Transaction ID : SA11AI.14799

Amount of Each Receipt this Period

0.50

☒ Memo ItemEARMARKED THROUGH SFA PAC [SA11AI.14787]
DEBT RETIREMENT**B.**

Full Name (Last, First, Middle Initial)

WALSH, TOM, , ,

Mailing Address 3438 LUFBERRY AVENUE

City
WANTAGHState
NYZip Code
11793FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2021

☐ Primary ☐ General
☒ Other (specify) ▼

Special-General

Election Cycle-to-Date ▼

15.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		28		2021

Transaction ID : SA11AI.14800

Amount of Each Receipt this Period

5.00

☒ Memo ItemEARMARKED THROUGH SFA PAC [SA11AI.14787]
DEBT RETIREMENT**C.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2021

☐ Primary ☐ General
☒ Other (specify) ▼

Special-General

Election Cycle-to-Date ▼

282430.92

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
09		03		2021

Transaction ID : SA11AI.14792

Amount of Each Receipt this Period

- 1037.50

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

- 992.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 13

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

MARK MOORES FOR CONGRESS

Full Name (Last, First, Middle Initial)

MARATHON OIL COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE (MEPAC)

A.

Mailing Address 5555 SAN FELIPE

City
HOUSTON

State
TX

Zip Code
77056

FEC ID number of contributing
federal political committee.

C C00040568

Name of Employer

Occupation

Receipt For: 2021

☐ Primary ☐ General
☒ Other (specify) ▼

Special-General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 16 / 2021

Transaction ID : SA11C.14807

Amount of Each Receipt this Period

1000.00

☐ Memo Item
DEBT RETIREMENT

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1000.00

1000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 13

☐ 11a ☐ 11b ☐ 11c ☒ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

MARK MOORES FOR CONGRESS

Full Name (Last, First, Middle Initial)

FLS CONNECT LLC

A.

Mailing Address 7300 HUDSON BLVD SUITE 270

City

SAINT PAUL

State

MN

Zip Code

55128

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2021

☐ Primary

☐ General

☒ Other (specify) ▼

Special-General

Election Cycle-to-Date ▼

476.42

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 12 2021

Transaction ID : SA14.14798

Amount of Each Receipt this Period

476.42

☐ Memo Item

VENDOR REFUND: OVERPAYMENT

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

476.42

476.42

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 13

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MARK MOORES FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DICKINSON WRIGHT PLLCMailing Address 1825 EYE STREET NW
SUITE 900City
WASHINGTONState
DCZip Code
20006Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2021

☐ Primary ☐ General
☒ Other (specify) ▼

Special-General

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	02	2021

FEC Identification Number

C

Amount of Each Disbursement this Period

279.50

Transaction ID : SB17.14812

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DICKINSON WRIGHT PLLCMailing Address 1825 EYE STREET NW
SUITE 900City
WASHINGTONState
DCZip Code
20006Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2021

☐ Primary ☐ General
☒ Other (specify) ▼

Special-General

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	27	2021

FEC Identification Number

C

Amount of Each Disbursement this Period

102.00

Transaction ID : SB17.14816

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RED CURVE SOLUTIONSMailing Address 138 CONANT STREET
SECOND FLOORCity
BEVERLYState
MAZip Code
01915Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2021

☐ Primary ☐ General
☒ Other (specify) ▼

Special-General

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
09	02	2021

FEC Identification Number

C

Amount of Each Disbursement this Period

96.04

Transaction ID : SB17.14819

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

477.54

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 13

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MARK MOORES FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2021

☐ Primary ☐ General
☒ Other (specify) ▼ Special-General

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		02		2021

FEC Identification Number

C

Amount of Each Disbursement this Period

15.00

Transaction ID : SB17.14820

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

15.00

TOTAL This Period (last page this line number only).....▶

492.54

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 13

<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
------------------------------------	------------------------------------	--	------------------------------------

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NAME OF COMMITTEE (In Full)

MARK MOORES FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MOORES, MARK, , ,

Mailing Address PO BOX 90970

City
ALBUQUERQUEState
NMZip Code
87199Purpose of Disbursement
CANDIDATE LOAN REPAYMENT

Candidate Name

MARK MOORES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2021

☐ Primary ☐ General
☒ Other (specify) ▼
Special-General

State: NM

District: 01

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		02		2021

FEC Identification Number

C C00773879

Amount of Each Disbursement this Period

15542.05

Transaction ID : SB19A.14824

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

15542.05

TOTAL This Period (last page this line number only).....▶

15542.05

SCHEDULE C (FEC Form 3)
LOANS

PAGE 12 OF 13

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4133

MARK MOORES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

MOORES, MARK, , ,

☐ Memo Item

Election: 2021

☐ Primary☐ General☒ Other (specify) ▼
Special-GeneralMailing Address
PO BOX 90970

City

ALBUQUERQUE

State

NM

ZIP Code

87199

☒ Personal Funds of the Candidate

Original Amount of Loan

200000.00

Cumulative Payment To Date

15542.05

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 03 M /

D 24 D /

Y 2021 Y

M M /

D D /

Y DUE ON DEMAND Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional).....▶

0.00

TOTALS This Period (last page in this line only).....▶

0.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A-N5HCB
.

Form/Schedule: SC/10

Transaction ID : SC/10.4133

(Current loan amount of 184457.95 from a balance of 184457.95 has been forgiven)

Form/Schedule:

Transaction ID: